



Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

JAN 10 2003

Robert B. Mandell, O.D.
President
Softfocal Company, Inc.
69 Sullivan Drive
Moraga, CA 94556

Re: K023791
Trade/Device Name: NuSoft (ocufilcon B) Spherical, Toric, Aspherical and Bifocal Soft
Contact Lenses for Daily Wear (lathe-cut, clear or visibility tinted)
Regulation Number: 21 CFR 886.5925
Regulation Name: Soft (hydrophilic) contact lens
Regulatory Class: Class II
Product Code: LPL
Dated: November 8, 2002
Received: November 13, 2002

Dear Dr. Mandell:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (301) 594-4613. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97) you may obtain. Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/dsma/dsmamain.html>

Sincerely yours,

A handwritten signature in cursive script that reads "A. Ralph Rosenthal".

A. Ralph Rosenthal, M.D.

Director

Division of Ophthalmic and Ear,

Nose and Throat Devices

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

Softfocal Company, Inc.
510(k) Premarket Notification
NuSoft Spherical, NuSoft Toric, NuSoft Aspheric , NuSoft Bifocal
(ocufilcon B) Soft Contact Lens for Daily Wear (lathe-cut, clear or tinted)

INDICATIONS FOR USE STATEMENT

Page 1 of 1

Device Name: Re:510(k) Application – NuSoft Spherical, NuSoft Toric, NuSoft Aspherical and NuSoft Bifocal (ocufilcon B) Soft Contact Lens for Daily Wear (lathe-cut, clear or tinted) (ocufilcon B) Soft Contact Lenses (Clear & Tinted, Lathe-cut)

INDICATIONS FOR USE:

The NuSoft Spherical (ocufilcon B) Soft Contact Lens is indicated for daily wear for the correction of visual acuity in aphakic or not-aphakic persons with non-diseased eyes that are nearsighted (myopic) or farsighted (hyperopic) and may exhibit astigmatism of 1.50D or less that does not interfere with visual acuity.

The NuSoft Toric (ocufilcon B) Soft Contact Lens is indicated for daily wear for the correction of visual acuity in aphakic or not-aphakic persons with non-diseased eyes that are myopic or hyperopic and have refractive astigmatism of 4.50D or less that does not interfere with visual acuity.

The NuSoft Aspherical (ocufilcon B) Soft Contact Lens is indicated for daily wear for the correction of visual acuity in aphakic or not-aphakic persons with non-diseased eyes that are myopic, or hyperopic, and/or presbyopic, and which may exhibit astigmatism of up to 1.50D that does not interfere with visual acuity.

The NuSoft Bifocal (ocufilcon B) Soft Contact Lens is indicated for daily wear for the correction of visual acuity in aphakic or not-aphakic persons with non-diseased eyes that are myopic, or hyperopic, and/or presbyopic and have refractive astigmatism of 4.50D or less that does not interfere with visual acuity.

NuSoft Soft Contact lenses may be disinfected with a chemical (not heat) disinfection system.

(PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE) Division of Ophthalmic Devices

Prescription Use ✓
(Per 21 CFR 801.109)

OR

Over-The-Counter Use _____

Karen Wamberton
(Division Sign-Off)
Division of Ophthalmic Ear,
Nose and Throat Devices

510(k) Number K023791

(Optional Format 1-2-96)